UNITEDSTATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

> TEMPORARY FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL

OMB Number: 3235-0076

Expires: September 30, 2008 Estimated average burden hours per response. . . . 4.00



UNIFORM LIMITED OFFERING EXEMPTION OCT 2 g 2008
Name of Offering (check if this is an amendment and name has changed, and indicate change.) 2006 Convertible Notes and Warrants Washington, DC
Filing Under (Check box(cs) that apply):
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
SightSpeed, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) 918 Parker Street, Suite A14, Berkeley, CA 94710 PROFESED Telephone Number (Including Area Code) 510.665.0353
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (If different from Executive Offices) NOV 04 2008
Brief Description of Business
Internet video communication THOMSON REUTERS
Type of Business Organization Corporation
Actual or Estimated Date of Incorporation or Organization: Month Year
GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.
Federal: Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230.501 et
seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549. Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. ATTENTION
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

BASIGIDEN	NITIGATION DATA								
2. Enter the information requested for the following:	••								
Each promoter of the issuer, if the issuer has been organized within the past five years;									
 Each beneficial owner having the power to vote or dispose, or direct 									
 Each executive officer and director of corporate issuers and of co 	rporate general and mana	aging partners of p	partnership issuers; and						
 Each general and managing partner of partnership issuers. 									
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)									
Csathy, Peter	_								
Business or Residence Address (Number and Street, City, State, Zip Code	·) ·								
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA	94710								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)									
Strauch, Roger A.									
Business or Residence Address (Number and Street, City, State, Zip Code	>)		•						
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA									
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner						
Full Name (Last name first, if individual)			,						
Miller, Daniel H.	•		•						
Business or Residence Address (Number and Street, City, State, Zip Code	c)								
c/o SightSpeed, Inc., 918 Parker Street, Sulte A14, Berkeley, CA									
	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)									
Rosenberg, Aron									
Business or Residence Address (Number and Street, City, State, Zip Cod									
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA	94710	·							
Check Box(es) that Apply: Promoter. Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)									
The Roda Group and related affiliates			-						
Business or Residence Address (Number and Street, City, State, Zip Cod									
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA	Executive Officer	☑ Director	General and/or						
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	V Director	Managing Partner						
Full Name (Last name first, if individual)			,						
Goldman, Ken	1-1								
Business or Residence Address (Number and Street, City, State, Zip Cod									
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA	••	Director	General and/or						
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	M Director	Managing Partner						
Full Name (Last name first, if individual)	,								
Tveter, Eric	•								
Business or Residence Address (Number and Street, City, State, Zip	\ 94710								
(Use blank sheet, or copy and use a	additional copies of this	sheet, as necess	ary)						
	2 of 9	•							

A BASIC IDENTIFICATION DA	TA
2. Enter the information requested for the following:	
 Each promoter of the issuer, if the issuer has been organized within the past five yet 	ars;
 Each beneficial owner having the power to vote or dispose, or direct the vote or dispose 	
 Each executive officer and director of corporate issuers and of corporate general and 	d managing partners of partnership issuers; and
 Each general and managing partner of partnership issuers. 	·
Check Box(es) that Apply: Promoter Beneficial Owner Executive Off	icer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Berger, Toby	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA 94710	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Off	icer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Treat, Brad	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA 94710	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Off	ficer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Miller, Damon	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA 94710	ficer
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Of	ficer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Lomond, Scott	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o SightSpeed, Inc., 918 Parker Street, Suite A14, Berkeley, CA 94710	
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Of	ficer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Of	ficer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive O	fficer Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of	of this sheet, as necessary)

SIL ANFORMATION ABOUT OFFERING													
1	1. You the insurance of the desired to sell to non-accordited investors in this offering?							Yes .	No. ☑				
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							ليا	ar.i				
2.									s N/A	<u>.</u> .			
								Yes	No C				
								Z	, ·				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.													
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such													
a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nam	ne of Ass	ociated Br	oker or Dea	aler					<u></u>			i : -	
					·			·			·····		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
	(Check	"All States	" or check	individual	States)								
·	AL	ĀK	AZ. IA.	AR	CA KY	CO LA	ME)	DE)	IDC. MA	EL.	GA) MN	LHL MS	MO
	MI MI	NE)	עאַ	KS NH	[X]	NM)	NY	NC.	ND	OH	(OK)	(OR)	PA
٠.	RL	SC	SD	TN	тх	UT	VT	VA	WA	WY	[w]	WY.	PR
Full	Full Name (Last name first, if individual)									,			
							7: 0 1			·			
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State.	Lip Code)					÷	
Name of Associated Broker or Dealer													
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			•			
•			or check									, 🗆 Al	1 States
	AL	AK	AZ.	AR	CA	CO	[CT]	DE	DC	EL	GA	HI	.[]].
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE.	עע	ИН	NI	NM		NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
	RL.	[sc]	[SD]	תת	. [TX] 	[UI]		(VA)	TAXY			٠	
Ful	l Name (Last name	first, if ind	ividual)									•
Bus	iness or	Residence	Address (l	Number an	d Street, C	ity, State,	Zip Code)		·				
Name of Associated Broker or Dealer													
Name of Associated broker of Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers									1 States				
(Check "All States" or check individual States)													
	AL	AK	(AZ)	AR	CA			DE)		EL MI	GA MNI	HI. MS.	MO ID
	MT	IN. NE	IA NV	KS NH	KY)	LA. NM	ME NY	MD NC	MA ND	OH	OK)	OR	PA
	RI	SC	SD	TN	TX		(VI)	VA	[WA]	WV	WI	WY	PR

OFFERING PRICE NUMBERFOR INVESTORS PEXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and aiready exchanged. Amount Already Aggregate Offering Price Sold Type of Security Equity\$ Common Preferred Convertible Securities (including warrants) \$ 4,375,000 \$ Other (Specify ____ Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors 4,375,000 Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Sold Security Type of Offering Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs..... Legal Fees.... 25,000 Accounting Fees Engineering Fees

.....

25,000

Sales Commissions (specify finders' fees separately).....

Total

Other Expenses (identify)

	G-OFFERING-PRICE, NUMB	ERIOJEINMESTORSTEARENSESPANDAUSEE	13.1			
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Coproceeds to the issuer."	Question 4.a. This difference is the "adjusted gra	oss 	•	\$ <u>.</u>	4,350,000
	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate a the payments listed must equal the adjusted gro	nd			
٠			•	Payments to Officers, Directors, & Affiliates	Pa	nyments to Others
	Salaries and fees		📋	s	. 🗆 s _	
•	Purchase of real estate		[_	\$	_ s_	
	Purchase, rental or leasing and installation of mac	hinery		•		
	Construction or leasing of plant buildings and faci	lities	 	\$	is_	
	Acquisition of other businesses (including the value offering that may be used in exchange for the asse	ue of securities involved in this				
	issuer pursuant to a merger)					
	Repayment of indebtedness		ــا ····	ائ	- ∐ - • (1) •	4,350,000
	Working capital			 	- KT	
	Other (specify):		_ L] <u>a</u>	- LJ3-	
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	Column Totals					
	Total Payments Listed (column totals added)			⊠ s_		
		D. FEDERAL SIGNATURE				
ciar	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Com	ımıss	ion, upon writt	en requ	est of its staff,
	er (Print or Type) ntSpeed, Inc.	Signature	D	ate 10/24/	08	
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
Sco	tt Lomond	President				
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